

HAITI

STRATEGIC FOCUS

The Centers for Disease Control and Prevention (CDC) Haiti office opened in 2002. Working in collaboration with Haiti's Ministry of Public Health and Population (MSPP), CDC is supporting the national response to HIV/AIDS by preventing the transmission of HIV, and by providing increased accessibility and improved quality of HIV clinical services, increasing patient adherence and retention in treatment, strengthening surveillance, epidemiology, laboratory, and health management information system, and expanding multidrug-resistant tuberculosis (MDR-TB) treatment availability.

Strengthening Health Systems: To ensure a sustainable and robust health system, CDC supports critical staffing needs and training programs with the greatest impact for medical and paramedical personnel, and for strengthening of MSPP governance and financial management mechanisms, strategic information systems and data use for informed decision-making.

Strengthening Laboratory Systems and Networks: CDC collaborates with the National Public Health Laboratory (LNSP) to develop multiple testing capacities, including Polymerase Chain Reaction (PCR) for diagnosis of HIV in infants, scale-up of viral load testing, and testing for opportunistic infections in HIV-infected people. CDC has helped the country to establish an external quality assurance program and a training curriculum to build capacity for lab accreditation.

Strengthening Surveillance and Health Information Systems: CDC is increasing access to strategic information by supporting MSPP in establishing and monitoring integrated health management information systems that include an electronic medical records (EMR) systems that is to cover more than 95% of patients on antiretroviral treatment (ART) in Haiti and a longitudinal web-based reporting and surveillance system for HIV and TB.

KEY ACTIVITIES AND ACCOMPLISHMENTS

Service Coverage: Our close collaboration with MSPP resulted in the adoption and implementation of the Test and Start strategy in 2016 in accordance with WHO recommendations, making ART available to all HIV-positive patients. As of 2017, CDC and partners have enrolled over 91,000¹ patients, including children, on ART – or 61% of all estimated people living with HIV (PLHIV)². CDC also supported HIV testing and counseling services for more than 1 million people in 2017 and promoted intensified case finding for TB -- resulting in an increase in the number of new patients placed on treatment from 2010 to 2017³ and an increase in ART coverage for TB/HIV co-infected patients.

Laboratory Capacity: CDC strengthened LNSP's capacity to provide quality diagnostic tests for HIV, TB, and other critical diseases, including the establishment of a national Specimen Referral Network for tracking and facilitating the collection and transport of biological specimens, and in expanding GeneXpert testing to all HIV-positive patients presenting symptoms of TB. CDC also helped MSPP to introduce viral load testing using dried blood spots sample collection and continues to support the expansion to ensure nationwide access. Viral load testing more than doubled from 26,843 in 2016 to 62,770 in 2017⁴.

Strategic Information: CDC has worked closely with MSPP to develop information systems for monitoring and tracking HIV patient data. The CDC-developed Patient Linkage and Retention (PLR) system links EMR data with HIV surveillance data and allows CDC and partners to follow patient progress and reduce loss to follow-up (LTFU). The PLR platform also facilitates a proactive approach to avoid LTFU by promoting regular contact with patients and improving access to treatment via community-based drug distribution and multi-month scripting of ART. Over 80 health facilities in Haiti currently use the PLR tracking tool, which has brought 16,000 patients LTFU back into treatment. Fingerprint-based biometric coding is used in 84 % of PEPFAR-funded treatment sites and is linked with EMR and the national HIV database to produce case-based surveillance and high-fidelity ART reporting.

Quality Assurance: CDC expanded external quality assurance practices at 204 laboratories and 135 HIV treatment sites in the country, supported the expansion of programs to prevent mother-to-child transmission to 98% of women in care at a health facility, and improved adherence to the comprehensive package of services for HIV-positive mothers and HIV-exposed infants.

Key Country Leadership

President:
Jovenel Moïse

Minister of Health:
Dr. Marie Gréta Roy
Clement

U.S. Ambassador:
Michele J. Sison

PEPFAR Coordinator:
Nina Wadhwa

CDC Haiti DGHT Director:
Dr. Lara Hall

Country Quick Facts

Per Capita GNI:
\$760 (2017)

Population:
10.9 million (2017)

Under 5 Mortality:
67 / 1,000 live births
(2016)

Life Expectancy:
63 years (2016)

Global HIV/AIDS Epidemic

Estimated HIV Prevalence
(Ages 15-49): 1.9 % (2017)

Estimated AIDS Deaths
(Age ≥15): 4,100 (2017)

Estimated Orphans Due to
AIDS: 48,000 (2017)

Reported Number
Receiving Antiretroviral
Therapy (ART) (Age ≥15):
90,606 (2017)

Global Tuberculosis
(TB) Epidemic

Estimated TB Incidence:
188 / 100,000 (2016)

TB patients with known
HIV-status who are HIV-
positive: 15% (2016)

TB Treatment Success
Rate: 80% (2015)

Country Staff: 61.5

Locally Employed Staff:
55.25
Direct Hires: 5.25
Fellows: 1

¹ PEPFAR Haiti ² UNAIDS 2018 ^{3,4} PEPFAR Haiti

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